

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

ADDRESS (number and street) ▼

211 S. Fifth Street

☐ Check if different than previously reported. (ACC)

Columbus

OH

43215

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00162339

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
05 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
05 31 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chairman Ranae Lentz

Signature of Treasurer

Chairman Ranae Lentz

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 25 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2014 To: M M / D D / Y Y Y Y 05 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y</span> 2014		<span style="border: 1px solid black; padding: 2px;">127231.13</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">111687.91</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">550807.32</span>	<span style="border: 1px solid black; padding: 2px;">1611129.19</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">662495.23</span>	<span style="border: 1px solid black; padding: 2px;">1738360.32</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">489529.38</span>	<span style="border: 1px solid black; padding: 2px;">1565394.47</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">172965.85</span>	<span style="border: 1px solid black; padding: 2px;">172965.85</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">90637.17</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
05 / 01 / 2014

To:

M M / D D / Y Y Y Y  
05 / 31 / 2014
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

65265.47

135541.47

(ii) Unitemized .....

53533.12

154005.62

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

118798.59

289547.09

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

39250.00

45750.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ►

158048.59

335297.09

## 12. Transfers From Affiliated/Other

Party Committees.....

106150.00

677826.83

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

22519.01

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

286608.73

575486.26

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

286608.73

575486.26

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ►

550807.32

1611129.19

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ►

264198.59

1035642.93

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	57919.18	133212.51
(ii) Non-Federal Share.....	328208.68	754945.78
(b) Other Federal Operating Expenditures .....	73295.78	230180.15
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	459423.64	1118338.44
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	169166.46
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	30105.74	275289.57
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	30105.74	275289.57
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	489529.38	1565394.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	161320.70	810448.69

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	158048.59	335297.09
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	158048.59	335297.09
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	131214.96	363392.66
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	22519.01
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	131214.96	340873.65

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

**A. Mr. Scott Aiman**

Mailing Address 7241 Hillbrook Lane, South

City State Zip Code  
 Novelty OH 44072-9514

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

None

Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 21 2014

Transaction ID : SA11AI.264533

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. RONALD AMSTUTZ**

Mailing Address 4456 WOOD LAKE TRL

City State Zip Code  
 WOOSTER OH 44691-8582

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

OHIO HOUSE OF REPRESENTATIVES

STATE REP.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 07 2014

Transaction ID : SA11AI.264558

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Richard Barnhart**

Mailing Address 10739 County Road M

City State Zip Code  
 Montpelier OH 43543-9783

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

FARMER

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 29 2014

Transaction ID : SA11AI.264609

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mr. Ralph Carruthers

Mailing Address 601 Glenway Dr

City State Zip Code  
 Hamilton OH 45013-3578

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 01 / 2014

Transaction ID : SA11AI.264791

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Robert Carter

Mailing Address 5642 Biscayne Ave

City State Zip Code  
 Cincinnati OH 45248-4256

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 01 / 2014

Transaction ID : SA11AI.264792

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. JAY N. CRANFORD III

Mailing Address 4136 N RICHMOND ST

City State Zip Code  
 ARLINGTON VA 22207

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

CLARK, GEDULDIG, CRANFORD, &amp; NIELSEN

PARTNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 20 / 2014

Transaction ID : SA11AI.264856

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

**A. Mrs. George Davis**

Mailing Address 22689 State Route 751

City State Zip Code  
 West Lafayette OH 43845-9737

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 19 2014

Transaction ID : SA11AI.264896

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mr. Byron Dawson**

Mailing Address 3286 Lyndon Road

City State Zip Code  
 Greenfield OH 45123-9510

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

SELF

Farmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1060.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 01 2014

Transaction ID : SA11AI.264899

Amount of Each Receipt this Period

560.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. NORMAN DIEDERICH PHD**

Mailing Address 9004 TIMBER EDGE DR

City State Zip Code  
 NORTH RIDGEVILLE OH 44039

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

DIEDERICH CONSULTING, LLC

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 01 2014

Transaction ID : SA11AI.264917

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1110.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 OF 97

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

**A. Mr. Larry Earman**

Mailing Address 4369 Shire Creek Ct

City State Zip Code  
 Hilliard OH 43026-2764

FEC ID number of contributing federal political committee.

C

Name of Employer

Ary &amp; Earman, C. P. A's

Occupation

C. P. A.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 13 2014

Transaction ID : SA11AI.264945

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mr. Kenneth Fibus**

Mailing Address 42 Redfern Dr

City State Zip Code  
 Youngstown OH 44505-1663

FEC ID number of contributing federal political committee.

C

Name of Employer

Steal City Corp.

Occupation

Exec.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 16 2014

Transaction ID : SA11AI.264988

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Donald Fleck**

Mailing Address 13910 Stimmel St NE

City State Zip Code  
 Paris OH 44669-9724

FEC ID number of contributing federal political committee.

C

Name of Employer

P.C.C., Minerva

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
 05 01 2014

Transaction ID : SA11AI.265005

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Sam Geduldig**

Mailing Address 1519 Pathfinders Lane

City State Zip Code  
 Mc Lean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Clark Lytle & Geduldig

Occupation

Senior Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 20 / 2014

Transaction ID : SA11AI.265057

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Ms. Lynne Gordon**

Mailing Address 915 Riverview Pl

City State Zip Code  
 Cincinnati OH 45202-1622

FEC ID number of contributing  
federal political committee.

C

Name of Employer

L.M. GORDON ART STUDIO

Occupation

Arts Administration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 06 / 2014

Transaction ID : SA11AI.265084

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. FRANK GUGLIELMI**

Mailing Address 332 PHEASANT RUN PL

City State Zip Code  
 FINDLAY OH 45840-7080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OHIO BANK & SAVINGS CO

Occupation

BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25000.00

Date of Receipt

05 / 07 / 2014

Transaction ID : SA11AI.265106

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mrs. Carol Hackett**

Mailing Address 550 Haven Dr Apt 305

City State Zip Code  
 Archbold OH 43502-3242

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 08 / 2014

Transaction ID : SA11AI.265112

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. JOSEPH HEAD**

Mailing Address 8855 CAMARGO CLUB DR

City State Zip Code  
 CINCINNATI OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ATKINS & PEARCE, INC.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

05 / 16 / 2014

Transaction ID : SA11AI.265173

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. HERBERT HOPPE**

Mailing Address 17 WARWICK LN

City State Zip Code  
 ROCKY RIVER OH 44116-2305

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WALDHEGER-COYREE CO. LPA

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 07 / 2014

Transaction ID : SA11AI.265226

Amount of Each Receipt this Period

125.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5325.00

**SCHEDULE A (FEC Form 3X)****ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Richard Horvitz**

Mailing Address 85 Stonewood Dr

City

State

Zip Code

Chagrin Falls

OH

44022-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Investor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2014

Transaction ID : SA11AI.265232

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. James and Beverlee Houseman**

Mailing Address 5026 Sheffield Ave

City

State

Zip Code

Powell

OH

43065-6630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	07	/	2014

Transaction ID : SA11AI.265236

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. DAVID HUNT**

Mailing Address 2503 FAIRMOUNT BLVD

City

State

Zip Code

CLEVELAND

OH

44106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2014

Transaction ID : SA11AI.265257

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Gerald Johnson**

Mailing Address 101 Lellian Ave

City State Zip Code  
Harrison OH 45030-1416

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2014

Transaction ID : SA11AI.265284

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. William Klatt**

Mailing Address 345 Walhalla Rd

City State Zip Code  
Columbus OH 43202-1422

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF OHIO

Occupation

JUDGE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 07 / 2014

Transaction ID : SA11AI.265330

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Kevin Kock**

Mailing Address 331 Peach St

City State Zip Code  
Cincinnati OH 45246-3509

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MANPOWER

Occupation

PROGRAMMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 06 / 2014

Transaction ID : SA11AI.265344

Amount of Each Receipt this Period

61.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

411.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Robert J. Kohlhepp**

Mailing Address 580 Chaswil Drive

City State Zip Code  
 Cincinnati OH 45255

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Cintas

Occupation

Vice Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 20 / 2014

Transaction ID : SA11AI.265348

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. CARL LINDNER III**

Mailing Address 9450 WHITEGATE LANE

City State Zip Code  
 CINCINNATI OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN FINANCIAL

Occupation

CO PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 30 / 2014

Transaction ID : SA11AI.265438

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. S. CRAIG LINDNER**

Mailing Address 7725 BUCKINGHAM LANE

City State Zip Code  
 CINCINNATI OH 45243

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN MONEY MANGMNT

Occupation

CO-PRESIDENT, CO-CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.265440

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

30000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Ms. Nancy Lyons**

Mailing Address 580 Piedmont St

City State Zip Code  
Wilmington OH 45177-2521

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CLINTON COUNTY LAW LIBRARY

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.265470

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MR. ALVIN MARSH**

Mailing Address PO BOX 97

City State Zip Code  
DOVER OH 44622

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STONE CREEK BRICK CO

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 09 / 2014

Transaction ID : SA11AI.265501

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. BEVERLY MARTIN**

Mailing Address 5632 HATTON COURT

City State Zip Code  
HILLIARD OH 43026-8099

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF OHIO - OHIO TUITION TRUST AUT

Occupation  
MARKETING DIRECTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 02 / 2014

Transaction ID : SA11AI.265506

Amount of Each Receipt this Period

200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

950.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MR. RAYMOND MASON**

Mailing Address PO BOX 83250

1688 EAST 5TH AVENUE

City

COLUMBUS

State

OH

Zip Code

43203

FEC ID number of contributing  
federal political committee.

C

Name of Employer

COLUMBUS TRUCK & EQUIPMENT

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 19 / 2014

Transaction ID : SA11AI.265521

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mrs. Elinor Matchneer**

Mailing Address 2229 Taylor Park Dr Apt 413

City

Reynoldsburg

State

OH

Zip Code

43068-7400

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 13 / 2014

Transaction ID : SA11AI.265522

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Michael May**

Mailing Address 1943 Timberidge Dr

City

Loveland

State

OH

Zip Code

45140-2634

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.265530

Amount of Each Receipt this Period

350.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1650.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

**A. MR. MICHAEL MELLIERE**

Mailing Address 5248 ARYSHIRE DR

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ICEMILLER WHITEBOARD

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 29 2014

Transaction ID : SA11AI.265578

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Dennis & Sue Ann Norton**

Mailing Address 10415 Hoover Woods Rd

City State Zip Code  
Galena OH 43021-9311

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Allstate Insurance

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 06 2014

Transaction ID : SA11AI.265690

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. JOHN & CHRISTINE OLSEN**

Mailing Address 4645 STONEHAVEN DRIVE

City State Zip Code  
COLUMBUS OH 43220

FEC ID number of contributing  
federal political committee.

C

Name of Employer

OHIO STATE UNIVERSITY HOSPITAL

Occupation

RETIRED PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 28 2014

Transaction ID : SA11AI.265707

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Nancy A. Panzica**

Mailing Address 313 Burwick Road

City State Zip Code  
Highland Heights OH 44143

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Panzica Construction

Occupation

General Contractor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 08 / 2014

**Transaction ID : SA11AI.265718**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Thomas & Annette Parnell**

Mailing Address 1401 N 13th St

City State Zip Code  
Cambridge OH 43725-1019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Parnell & Associates, Inc.

Occupation

Construction

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 21 / 2014

**Transaction ID : SA11AI.265725**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Ms. DONNA PETERS**

Mailing Address 5195 CAMBRIAN RD

City State Zip Code  
TOLEDO OH 43623-2662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 21 / 2014

**Transaction ID : SA11AI.265740**

Amount of Each Receipt this Period

750.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1450.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. William Pitzer**

Mailing Address 55 Brookpark Dr

City State Zip Code  
Canfield OH 44406-1115

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

**Transaction ID : SA11AI.265755**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Melissa M. Pope**

Mailing Address

5617 S Ridge W

City State Zip Code  
Ashtabula OH 44005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BEST EFFORTS

BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

329.47

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

**Transaction ID : SA11AI.265774**

Amount of Each Receipt this Period

329.47

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. SUSAN RECTOR**

Mailing Address 67 E. DESHLER AVE

City State Zip Code  
COLUMBUS OH 43206

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

ICEMILLER WHITEBOARD

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 29 / 2014

**Transaction ID : SA11AI.265815**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

679.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. John Sargeant**

Mailing Address 118 Woodhaven Dr

City State Zip Code  
 Sidney OH 45365-9478

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

05 / 12 / 2014

Transaction ID : SA11AI.265871

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mr. Michael Saxon**

Mailing Address 514 Brookstone Ct

City State Zip Code  
 Akron OH 44321-1265

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Saxon Jewelers

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 29 / 2014

Transaction ID : SA11AI.265876

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Jack Schindler**

Mailing Address 16282 Road 20

City State Zip Code  
 Fort Jennings OH 45844-9700

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

BEST EFFORTS

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.265885

Amount of Each Receipt this Period

90.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

690.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

A. Mr. Carl Schlotman

Mailing Address 8726 Decima St

City

Cincinnati

State

OH

Zip Code

45242-8028

FEC ID number of contributing  
federal political committee.

C

Name of Employer

sales

Occupation

Insurance Agent

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 29 / 2014

Transaction ID : SA11AI.265893

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

B. Mr. Howard Seeds

Mailing Address 1170 Sharrott Creek Dr

City

North Lima

State

OH

Zip Code

44452-8539

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Findley Welding Supply

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 01 / 2014

Transaction ID : SA11AI.265920

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

C. SUMMIT SHAH

Mailing Address 6268 BELLOW VALLEY DR

City

DUBLIN

State

OH

Zip Code

43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PREMIER ALLERGY

Occupation

PHYSICIAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
05 / 15 / 2014

Transaction ID : SA11AI.265934

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

1750.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Alan Starkoff**

Mailing Address 4387 Tarrytown Ct

City

New Albany

State

OH

Zip Code

43054-9679

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Ice Miller, LLP

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 29 / 2014

**Transaction ID : SA11AI.266014**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mr. John Stevenson**

Mailing Address 6310 Strathallan Dr

City

Bedford

State

OH

Zip Code

44146-4063

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2014

**Transaction ID : SA11AI.266027**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mrs. Jane Timken**

Mailing Address 6559 Hills And Dales Rd NW

City

Canton

State

OH

Zip Code

44708-1121

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Stark County Comm.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

05 / 02 / 2014

**Transaction ID : SA11AI.266096**

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. William Timmermeister**

Mailing Address 2100 N Cable Rd

City State Zip Code  
Lima OH 45805-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIMA CADILLAC CO

Occupation  
PRES.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

05 / 09 / 2014

Transaction ID : SA11AI.266099

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mr. William Timmermeister**

Mailing Address 2100 N Cable Rd

City State Zip Code  
Lima OH 45805-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LIMA CADILLAC CO

Occupation  
PRES.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

05 / 27 / 2014

Transaction ID : SA11AI.266100

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mrs. Barbara Trueman**

Mailing Address 5490 Hayden Run Rd

City State Zip Code  
Hilliard OH 43026-7789

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RED ROOF INNS, INC.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 28 / 2014

Transaction ID : SA11AI.266118

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Gary Van Gundy**

Mailing Address 618 Greenmount Blvd

City

Dayton

State

OH

Zip Code

45419-3271

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DRT MFG CO

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 01 / 2014

Transaction ID : SA11AI.266140

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MS. BERNICE M. WENDLAND**

Mailing Address 1953 AURORA AVENUE

City

LEWIS CENTER

State

OH

Zip Code

43035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 05 / 2014

Transaction ID : SA11AI.266193

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. BILL WHITAKER**

Mailing Address GALENA PIKE

1350 GALENA PIKE

City

WEST PORTSMOUTH

State

OH

Zip Code

45663

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SOLID ROCK CONSTRUCTION

Occupation

INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

05 / 07 / 2014

Transaction ID : SA11AI.266208

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Lowell Yoder**

Mailing Address Po Box 444

City State Zip Code  
Holland OH 43528-0444

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEELER GROUP INC.

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
05 27 2014

Transaction ID : SA11AI.266265

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

50.00

65265.47

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Buckeye Patriot PAC**

Mailing Address 2525 N Limestone St Ste 103

City State Zip Code  
 Springfield OH 45503-1185

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA11C.266278

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. CUYAHOGA COUNTY REPUBLICAN PARTY**

Mailing Address ROBERT FROST, CHARIMAN  
 1500 W 3RD ST STE 120

City State Zip Code  
 CLEVELAND OH 44113-1447

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 27 / 2014

Transaction ID : SA11C.266279

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. Fifth Third Bancorp PAC C00290502**

Mailing Address Mr. Tom Ruebel  
 38 Fountain Square Plaza

City State Zip Code  
 Cincinnati OH 45263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Fifth Third Bancorp PAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 07 / 2014

Transaction ID : SA11C.266280

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

14000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Full Name (Last, First, Middle Initial)

**A. JACKSON COUNTY REPUBLICAN PARTY**

Mailing Address JON HENSLER, CHAIRMAN

151 1/2 BROADWAY STREET

City	State	Zip Code
JACKSON	OH	45640

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11C.266282

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. LATOURETTE FOR CONGRESS COMM.**

Mailing Address 320 KENARDEN DR

City	State	Zip Code
CLEVELAND	OH	44143

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2014

Transaction ID : SA11C.266284

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. OHIO FARM BUREAU FEDERATION PAC**

Mailing Address MR. DOUG FOXX

PO BOX 182383

City	State	Zip Code
COLUMBUS	OH	43218-2383

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	06	/	2014

Transaction ID : SA11C.266285

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

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16500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 8331 LITTLE HARBOR DRIVE

City State Zip Code  
CINCINNATI OH 45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 01 / 2014

**Transaction ID : SA11C.266286**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 8331 LITTLE HARBOR DRIVE

City State Zip Code  
CINCINNATI OH 45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 12 / 2014

**Transaction ID : SA11C.266287**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **c. Republican Main Street PAC**

Mailing Address 1220 L Street NW  
Suite 100-263

City State Zip Code  
Washington DC 20005-4018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Republican Main Street PAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2014

**Transaction ID : SA11C.266288**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

8500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. WOOLPERT, INC. PAC**

Mailing Address 4454 IDEA CENTER BOULEVARD

City State Zip Code  
 DAYTON OH 45430

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 05 / 2014

**Transaction ID : SA11C.266290**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

39250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. BOEHNER FOR SPEAKER**

Mailing Address 320 FIRST ST. SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00478354

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60240.51

Date of Receipt

**05 / 13 / 2014**

**Transaction ID : SA12.266465**

Amount of Each Receipt this Period

36628.96

Transfer - see BFS 5/13

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF DAVE JOYCE**

Mailing Address 320 KENARDEN DRIVE

City State Zip Code  
CLEVELAND OH 44143

FEC ID number of contributing  
federal political committee.

**C** C00527457

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

62000.00

Date of Receipt

**05 / 16 / 2014**

**Transaction ID : SA12.266482**

Amount of Each Receipt this Period

43600.00

Transfer

Full Name (Last, First, Middle Initial)

## **c. Huntington Natl. Bank PAC C00165589**

Mailing Address C/O Barbara Benham  
41 South High Street

City State Zip Code  
Columbus OH 43215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

HUNTINGTON NAT'L BANK

PAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**05 / 13 / 2014**

**Transaction ID : SA12.266475**

Amount of Each Receipt this Period

5000.00

BFS 5/13

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

43600.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. John Kaneb**

Mailing Address 34 Masconomo Street

City State Zip Code  
 Manchester MA 01944

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HP Hood, LLC

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA12.266469

Amount of Each Receipt this Period

10000.00

BFS 5/13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. James Mason**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA12.266472

Amount of Each Receipt this Period

10000.00

BFS 5/13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. MORONGO BAND OF MISSION INDIANS NATIVE AMERICAN RIGHTS FUND**

Mailing Address 12700 PUMARRA ROAD

City State Zip Code  
 BANNING CA 92220

FEC ID number of contributing  
federal political committee.

C C90009622

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
 05 / 13 / 2014

Transaction ID : SA12.266477

Amount of Each Receipt this Period

2300.00

BFS 5/13

[MEMO ITEM]

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. PPL PEOPLE FOR GOOD GOVERNMENT**

Mailing Address TWO NORTH NINTH STREET  
GENTW2

City State Zip Code  
ALLENTOWN PA 18101

FEC ID number of contributing  
federal political committee.

**C** C00228106

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**05** / **13** / **2014**

**Transaction ID : SA12.266474**

Amount of Each Receipt this Period

5000.00

BFS 5/13

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. R. Brooks Reed**

Mailing Address 12400 Colt Road, Suite 950

City State Zip Code  
Dallas TX 75251

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

**05** / **13** / **2014**

**Transaction ID : SA12.266470**

Amount of Each Receipt this Period

10000.00

BFS 5/13

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443760.00

Date of Receipt

**05** / **08** / **2014**

**Transaction ID : SA12.266483**

Amount of Each Receipt this Period

62550.00

Transfer

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

62550.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 97  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT**

Mailing Address 600 13th St., NW  
Suite 340

City Washington State DC Zip Code 20005

FEC ID number of contributing  
federal political committee.

C C00010470

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
05 / 13 / 2014

Transaction ID : SA12.266480

Amount of Each Receipt this Period

5000.00

BFS 5/13

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

106150.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Perry Alexandrides Jr.**

Mailing Address % ORP, 211 South 5th Ave

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 09 2014
**Transaction ID : SB21B.266390**

Amount of Each Disbursement this Period

1489.94

Full Name (Last, First, Middle Initial)

**B. Perry Alexandrides Jr.**

Mailing Address % ORP, 211 South 5th Ave

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 23 2014
**Transaction ID : SB21B.266435**

Amount of Each Disbursement this Period

1257.67

Full Name (Last, First, Middle Initial)

**C. Greg Allison**

Mailing Address % OH Republican Party 211 S 5th St

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 09 2014
**Transaction ID : SB21B.266403**

Amount of Each Disbursement this Period

1480.02

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4227.63

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Brian Barnes**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Mailing Address % OH Rep Party, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266391**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2752.34

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Brian Barnes**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Mailing Address % OH Rep Party, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266436**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2496.87

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Brian Bauman**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Mailing Address % OH Republican Party 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266392**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1477.18

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6726.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Brian Bauman**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Mailing Address % OH Republican Party 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266437**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

1251.52
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Blair Cathcart**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		09		2014

Mailing Address % OH Republican Party  
211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266393**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

1650.37
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Blair Cathcart**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Mailing Address % OH Republican Party  
211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266438**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

1840.59
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4742.48
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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

2248.20

State: OH District: 15

MM / DD / YYYY

2497.11

State: OH District: 15

642.14

State:  District:

5387.45



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Scott Kayser**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	09	/	2014

Mailing Address % Oh Republican Party 211 S High S

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266396**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1486.70

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Scott Kayser**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	23	/	2014

Mailing Address % Oh Republican Party 211 S High S

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266443**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1261.06

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Chris Martinez**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	23	/	2014

Mailing Address 211 South Fifth Stre

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266444**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

647.22

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

3394.98

**TOTAL** This Period (last page this line number only)..... ►





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Oxford Communications**

Mailing Address 121 S Alfred St

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Fundraising consulting - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 30 2014**Transaction ID : SB21B.266457**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Jeffery Pastor**

Mailing Address 211 S. Fifth St

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 09 2014**Transaction ID : SB21B.266398**

Amount of Each Disbursement this Period

2748.20

Full Name (Last, First, Middle Initial)

**C. Jeffery Pastor**

Mailing Address 211 S. Fifth St

City Columbus State OH Zip Code 43215

Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y  
05 23 2014**Transaction ID : SB21B.266447**

Amount of Each Disbursement this Period

2264.95

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7013.15

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

### A. PLIC - SBD Grand Island

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.266383

001

Category/  
Type

Amount of Each Disbursement this Period

184.64

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

State:  District:

**B. Mr. Bevan Schneck**

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.266399

001

Category/  
Type

Amount of Each Disbursement this Period

1480.57

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

State:  District:

**C. Mr. Bevan Schneck**

Date of Disbursement

Transaction ID : SB21B.266448

001

Category/  
Type

Amount of Each Disbursement this Period

1512.58

Disbursement For: 2014

☐ Primary ☒ General

☐ Other (specify) ▼

State: OH District: 15

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3177.79

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Amanda Sima**

Mailing Address 1316 Oakhill Rd

City	State	Zip Code
Blacklick	OH	43004

Purpose of Disbursement  
fundraising consulting - not candidate specific

Candidate Name

003

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

**Transaction ID : SB21B.266451**

Amount of Each Disbursement this Period

3000.00
---------

Full Name (Last, First, Middle Initial)

**B. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City	State	Zip Code
Centerville	OH	45459

Purpose of Disbursement  
insurance premium - not candidate specific

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

**Transaction ID : SB21B.266353**

Amount of Each Disbursement this Period

65.40
-------

Full Name (Last, First, Middle Initial)

**C. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City	State	Zip Code
Centerville	OH	45459

Purpose of Disbursement  
Staff Insurance premium

Candidate Name

**STEVE MR. STIVERS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: OH District: 15

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

**Transaction ID : SB21B.266384**

Amount of Each Disbursement this Period

65.40
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3130.80
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City Centerville      State OH      Zip Code 45459

Purpose of Disbursement  
Staff Insurance premium - not candidate specific

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      14      2014
**Transaction ID : SB21B.266385**

Amount of Each Disbursement this Period

275.37

Full Name (Last, First, Middle Initial)

**B. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City Centerville      State OH      Zip Code 45459

Purpose of Disbursement  
Staff Insurance premium - not candidate specific

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      14      2014
**Transaction ID : SB21B.266387**

Amount of Each Disbursement this Period

111.87

Full Name (Last, First, Middle Initial)

**C. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City Centerville      State OH      Zip Code 45459

Purpose of Disbursement  
Insurance premium - not candidate specific

Candidate Name

Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05      27      2014
**Transaction ID : SB21B.266368**

Amount of Each Disbursement this Period

275.37

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

662.61

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Superior Dental Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 6683 Centerville Business Pkwy

City	State	Zip Code
Centerville	OH	45459

Purpose of Disbursement  
Staff insurance premium

001

**Transaction ID : SB21B.266370**

Amount of Each Disbursement this Period

65.40
-------

Candidate Name

**STEVE MR. STIVERS**Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State: OH    District: 15

Full Name (Last, First, Middle Initial)

**B. Superior Dental Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 6683 Centerville Business Pkwy

City	State	Zip Code
Centerville	OH	45459

Purpose of Disbursement  
Staff Insurance Premium - not candidate specific

001

**Transaction ID : SB21B.266371**

Amount of Each Disbursement this Period

275.37
--------

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State:    District:

Full Name (Last, First, Middle Initial)

**C. Superior Dental Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 6683 Centerville Business Pkwy

City	State	Zip Code
Centerville	OH	45459

Purpose of Disbursement  
Staff Insurance premium - not candidate specific

001

**Transaction ID : SB21B.266372**

Amount of Each Disbursement this Period

111.87
--------

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014  
☐ Primary    ☒ General  
☐ Other (specify) ▼

State:    District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

452.64

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. United Health Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Mailing Address 9200 Worthington Rd

City	State	Zip Code
Westerville	OH	43082

Purpose of Disbursement  
Staff Insurance Premium

001

**Transaction ID : SB21B.266354**

Amount of Each Disbursement this Period

553.04
--------

Candidate Name

**STEVE MR. STIVERS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OH District: 15

Full Name (Last, First, Middle Initial)

**B. United Health Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Mailing Address 9200 Worthington Rd

City	State	Zip Code
Westerville	OH	43082

Purpose of Disbursement  
Staff Insurance Premium - not candidate specific

001

**Transaction ID : SB21B.266380**

Amount of Each Disbursement this Period

829.57
--------

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. United Health Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		24		2014

Mailing Address 9200 Worthington Rd

City	State	Zip Code
Westerville	OH	43082

Purpose of Disbursement  
Staff Insurance Premium - not candidate specific

001

**Transaction ID : SB21B.266379**

Amount of Each Disbursement this Period

1382.60
---------

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2765.21

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. United Health Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Mailing Address 9200 Worthington Rd

**Transaction ID : SB21B.266374**

City	State	Zip Code
Westerville	OH	43082

Amount of Each Disbursement this Period

Purpose of Disbursement  
Staff Insurance Premium - not candidate specific

001

3041.74
---------

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary   ☒ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. United Health Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Mailing Address 9200 Worthington Rd

**Transaction ID : SB21B.266375**

City	State	Zip Code
Westerville	OH	43082

Amount of Each Disbursement this Period

Purpose of Disbursement  
Staff Insurance Premium

001

553.40
--------

Candidate Name

Category/  
Type**STEVE MR. STIVERS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary   ☒ General  
☐ Other (specify) ▼

State: OH District: 15

Full Name (Last, First, Middle Initial)

**C. United Health Care**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		27		2014

Mailing Address 9200 Worthington Rd

**Transaction ID : SB21B.266376**

City	State	Zip Code
Westerville	OH	43082

Amount of Each Disbursement this Period

Purpose of Disbursement  
Staff Insurance premium - not candidate specific

001

829.57
--------

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

☐ Primary   ☒ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4424.71

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2014

Mailing Address 2323 Citygate Drive

City	State	Zip Code
Columbus	OH	43218

**Transaction ID : SB21B.266363**Purpose of Disbursement  
Postage - not candidate specific

003

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1568.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Jacob Witzel-McConkey**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		09		2014

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266400**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1480.02

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Jacob Witzel-McConkey**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		23		2014

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.266449**Purpose of Disbursement  
ORP Staff, payroll, taxes and fees - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1249.79

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4297.81



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

2259.92

MM / DD / YYYY

2504.44

4764.36

73295.78

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Perry Alexandrides Jr.**

Mailing Address % ORP, 211 South 5th Ave

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - not candidate specific - see PA 5/14

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	14	/	2014

**Transaction ID : SB30B.266318**

Amount of Each Disbursement this Period

91.30
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Avis - Mento**

Mailing Address 7875 Johnnycake Ridge Rd

City	State	Zip Code
Mentor	OH	44060

Purpose of Disbursement  
Car Rental - ES 5/14

Candidate Name

**DAVID P JOYCE**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State: OH	District: 14

Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	02	/	2014

**Transaction ID : SB30B.266346**

Amount of Each Disbursement this Period

248.52
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Mr. Samuel Bain**

Mailing Address % OH GOP, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Office Supplies - not candidate specific - see SB 5/7

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	07	/	2014

**Transaction ID : SB30B.266315**

Amount of Each Disbursement this Period

62.56
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Connect Realty**

Mailing Address 1145 Goodale Blvd

City	State	Zip Code
Grandview Heights	OH	43212

Purpose of Disbursement  
rent victory center - not candidate specific

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

**Transaction ID : SB30B.266295**

Amount of Each Disbursement this Period

1875.00
---------

Full Name (Last, First, Middle Initial)

**B. Duchess Shoppe**

Mailing Address 825 E. Broad St

City	State	Zip Code
Columbus	OH	43206

Purpose of Disbursement  
Water - not candidate specific - RZ 5/7

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		12		2014

**Transaction ID : SB30B.266307**

Amount of Each Disbursement this Period

17.97
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Home Depot - Hilliard**

Mailing Address 4101 Trueman Blvd

City	State	Zip Code
Hilliard	OH	43026

Purpose of Disbursement  
Office Cleaning Supplies - not candidate specific - RZ 5/7

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

**Transaction ID : SB30B.266303**

Amount of Each Disbursement this Period

34.70
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1875.00
---------

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Home Depot - Hilliard**

Mailing Address 4101 Trueman Blvd

City	State	Zip Code
Hilliard	OH	43026

Purpose of Disbursement  
Office supplies - not candidate specific - RZ 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

**Transaction ID : SB30B.266306**

Amount of Each Disbursement this Period

14.99
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jimmy Johns - Downtown**

Mailing Address 20 South Front St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Food - not candidate specific - RZ 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2014

**Transaction ID : SB30B.266313**

Amount of Each Disbursement this Period

98.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Jimmy Johns - Downtown**

Mailing Address 20 South Front St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Food - not candidate specific - RZ 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		07		2014

**Transaction ID : SB30B.266314**

Amount of Each Disbursement this Period

76.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Krogers - North High**

Mailing Address 1350 North High St

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
Water - not candidate specific - JW 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 22 / 2014

**Transaction ID : SB30B.266299**

Amount of Each Disbursement this Period

11.37

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. Krogers - North High**

Mailing Address 1350 North High St

City State Zip Code  
Columbus OH 43215

Purpose of Disbursement  
Trash bags - not candidate specific - JW 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 29 / 2014

**Transaction ID : SB30B.266305**

Amount of Each Disbursement this Period

9.66

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **C. Little Ceasars Grandview**

Mailing Address 1242 W 5th Ave

City State Zip Code  
Grandview OH 43212

Purpose of Disbursement  
Food - not candidate specific - RZ 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 12 / 2014

**Transaction ID : SB30B.266308**

Amount of Each Disbursement this Period

42.99

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

0.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Majority Strategies**Mailing Address 135 Professional Drive  
Suite 104City State Zip Code  
Ponte Vedra Beach FL 32082Purpose of Disbursement  
GOTV Mail - Not Candidate Specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	27	/	2014

**Transaction ID : SB30B.266484**

Amount of Each Disbursement this Period

24227.02
----------

Full Name (Last, First, Middle Initial)

**B. Residence Inn Mentor**

Mailing Address 5660 Emerald Court

City State Zip Code  
Mentor OH 44060Purpose of Disbursement  
Hotel Rooms SW 5/22

Candidate Name

**DAVID P JOYCE**Office Sought: ☒ House  
☐ Senate  
☐ President  
State: OH District: 14Disbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	14	/	2014

**Transaction ID : SB30B.266365**

Amount of Each Disbursement this Period

3935.79
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Standard Parking**

Mailing Address 245 Marconi Blvd

City State Zip Code  
Columbus OH 43215Purpose of Disbursement  
Parking - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	27	/	2014

**Transaction ID : SB30B.266323**

Amount of Each Disbursement this Period

250.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

24477.02
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Emily Stier**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Mailing Address 320 First Street, SE

City	State	Zip Code
Washington	DC	20003

**Transaction ID : SB30B.266344**Purpose of Disbursement  
Reimbursement - see ES 5/14

002

Amount of Each Disbursement this Period

248.52
--------

Candidate Name

**DAVID P JOYCE**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 14

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Strategy Group for Phones**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2014

Mailing Address 7669 Stagers Loop

City	State	Zip Code
Delaware	OH	43015

**Transaction ID : SB30B.266291**Purpose of Disbursement  
Phones for Voter ID - Not candidate specific

001

Amount of Each Disbursement this Period

395.07
--------

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Strategy Group for Phones**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2014

Mailing Address 7669 Stagers Loop

City	State	Zip Code
Delaware	OH	43015

**Transaction ID : SB30B.266292**Purpose of Disbursement  
Phones voter ID - not candidate specific

001

Amount of Each Disbursement this Period

816.96
--------

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1212.03

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Strategy Group for Phones**

Mailing Address 7669 Stagers Loop

City	State	Zip Code
Delaware	OH	43015

Purpose of Disbursement  
phones voter id - not candidate specific

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		29		2014

**Transaction ID : SB30B.266293**

Amount of Each Disbursement this Period

2266.00
---------

Full Name (Last, First, Middle Initial)

**B. Target - Boardman**

Mailing Address 417 Boardman Poland Road

City	State	Zip Code
Boardman	OH	44512

Purpose of Disbursement  
Ink Cartridges - not candidate specific - PA 5/14

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2014

**Transaction ID : SB30B.266319**

Amount of Each Disbursement this Period

37.43
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Target - Huber Heights**

Mailing Address 5700 Executive Blvd

City	State	Zip Code
Huber Heights	OH	45424

Purpose of Disbursement  
Toner Cartridges - not candidate specific - SB 5/7

Candidate Name

001

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		10		2014

**Transaction ID : SB30B.266316**

Amount of Each Disbursement this Period

62.56
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2266.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Time Warner Cable**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		27		2014

Mailing Address 7800 Crescent Executive Dr

City	State	Zip Code
Charlotte	NC	28217

**Transaction ID : SB30B.266325**Purpose of Disbursement  
Phone & Internet - not candidate specific

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

253.48

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Tim Hortons - Fishinger**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2014

Mailing Address 3711 Fishinger Blvd

City	State	Zip Code
Hilliard	OH	43026

**Transaction ID : SB30B.266311**Purpose of Disbursement  
donuts - not candidate specific - RZ 5/7

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

10.28

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. US Postmaster - Boardman**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		09		2014

Mailing Address 143 Boardman Canfield Rd

City	State	Zip Code
Boardman	OH	44512

**Transaction ID : SB30B.266321**Purpose of Disbursement  
Postage - not candidate specific - PA 5/15

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

53.87

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

253.48

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sheryl Warner**

Mailing Address 211 S. Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - See SW 5/22

Candidate Name

**DAVID P JOYCE**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 14

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	22	/	2014

**Transaction ID : SB30B.266364**

Amount of Each Disbursement this Period

3935.79
---------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jacob Witzel-McConkey**

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - not candidate specific see JW 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	07	/	2014

**Transaction ID : SB30B.266297**

Amount of Each Disbursement this Period

21.03
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Ryan Zickefoose**

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Mileage reimbursement - not candidate specific - RZ 5/7

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	18	/	2014

**Transaction ID : SB30B.266310**

Amount of Each Disbursement this Period

286.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 97

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Ryan Zickefoose**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		07		2014

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB30B.266302**Purpose of Disbursement  
reimbursement - not candidate specific - see RZ 5/7

001

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

409.33

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

**[MEMO ITEM]**

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/  
Type

Amount of Each Disbursement this Period

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

30083.53

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 60 OF 97

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ActRight Engagement**

Nature of Debt (Purpose):

party hdq - web site updates and  
improvements - not candidate specific

Mailing Address 2029K St Nw, Ste 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

1762.50

Transaction ID : SD10.251764

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1762.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ActRight Engagement**

Nature of Debt (Purpose):

web site updates

Mailing Address 2029K St Nw, Ste 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

2673.00

Transaction ID : SD10.253995

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2673.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ActRight Engagement**

Nature of Debt (Purpose):

Website hosting and maintenance fees

Mailing Address 2029K St Nw, Ste 300

City

State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

1575.00

Transaction ID : SD10.255424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1575.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6010.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 61 OF 97

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**American Express**Nature of Debt (Purpose):  
late fees

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

1531.70

Transaction ID : SD10.259085

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1531.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Hdqtrs Phone**Nature of Debt (Purpose):  
party hdq phone service

Mailing Address PO Box 13148

City State

Zip Code

Newark

NJ

07101

Outstanding Balance Beginning This Period

2025.35

Transaction ID : SD10.256320

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2025.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Hdqtrs Phone**Nature of Debt (Purpose):  
Party dhq phone service - paid from ORP  
Restricted account - see memo text

Mailing Address PO Box 13148

City

State

Zip Code

Newark

NJ

07101

Outstanding Balance Beginning This Period

-2025.35

Transaction ID : SD10.258217

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-2025.35

1) **SUBTOTALS** This Period This Page (optional)..... ►

1531.70

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.256320

This invoice was paid from our Restricted Fund - which allows for administrative expenses payment - see  
corresponding negative entry on 8/16/13

Form/Schedule: SD10

Transaction ID: SD10.258217

This entry is to offset an outstanding debt dated 6/19/13 - this invoice was paid from the ORP Restricted fund - which  
allows for administrative expense payment

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 63 OF 97

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Office Fax**

Nature of Debt (Purpose):

election night costs - not candidate specific

Mailing Address PO Box 8100

City State

Zip Code

Aurora

IL

60507-8100

Outstanding Balance Beginning This Period

2673.65

Transaction ID : SD10.248880

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2673.65

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Office Fax**

Nature of Debt (Purpose):

Election night costs - debt paid with American Express - see memo text

Mailing Address PO Box 8100

City State

Zip Code

Aurora

IL

60507-8100

Outstanding Balance Beginning This Period

-2673.65

Transaction ID : SD10.254026

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-2673.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gordon Flesch Co Inc**

Nature of Debt (Purpose):

party hdq - copy costs - not candidate specific

Mailing Address PO Box 73288

City

State

Zip Code

Cleveland

OH

44193

Outstanding Balance Beginning This Period

357.52

Transaction ID : SD10.251561

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

357.52

1) **SUBTOTALS** This Period This Page (optional)..... ►

357.52

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.254026

This invoice was paid via the American Express Credit Card on 2/13/13. The debt is being transferred from AT&T to American Express, The closing date of that American Express bill will be March 8, 2013 and will be included with the debt schedule entry on the April 20th report.

Form/Schedule:

Transaction ID:



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 65 OF 97

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**King Strategic Communications**Nature of Debt (Purpose):  
printing and postage

Mailing Address 4605 Morse Road Suite 101

City State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

22203.51

Transaction ID : SD10.259086

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22203.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**King Strategic Communications**Nature of Debt (Purpose):  
printing and postage

Mailing Address 4605 Morse Road Suite 101

City State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

30157.90

Transaction ID : SD10.259087

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30157.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Loud & Clear Inc**Nature of Debt (Purpose):  
Election night production costs - not candidate  
specificMailing Address 2001 Dalton Ave  
Ste 201City  
CincinnatiState  
OHZip Code  
45214

Outstanding Balance Beginning This Period

20000.00

Transaction ID : SD10.248875

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

72361.41

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.248875

This invoice was not included on the original report filed 11/26/12 because the invoice was not received by the Ohio Republican Party accounting staff until 12/14/12. This invoice was paid on the American Express that was added to the Debt schedule dted 2/6/13 - therefore it is included on the debt schedule as part of the American Express and will be removed from the debt schedule

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 67 OF 97

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Loud & Clear Inc**

Nature of Debt (Purpose):

Election night production - paid via American Express -see memo text

Mailing Address 2001 Dalton Ave  
Ste 201City State Zip Code  
Cincinnati OH 45214

Outstanding Balance Beginning This Period

-20000.00

Transaction ID : SD10.254025

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-20000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising mailing -  
prospecting donors

Mailing Address 121 S Alfred St

City State Zip Code  
Alexandria VA 22314

Outstanding Balance Beginning This Period

1968.12

Transaction ID : SD10.255429

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1968.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party hdq operations telemarketing fundraising  
- not candidate specific

Mailing Address 121 S Alfred St

City State Zip Code  
Alexandria VA 22314

Outstanding Balance Beginning This Period

15162.00

Transaction ID : SD10.257230

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15162.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

-2869.88

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.254025

This vendor was paid via American Express on 1/24/13. This debt that was previously recorded as Loud and Clear is now included in the debt reported on this schedule as owed to American Express, dated 2/6/13.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 69 OF 97

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

13234.20

Transaction ID : SD10.257231

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13234.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1448.16

Transaction ID : SD10.257232

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1448.16

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

895.00

Transaction ID : SD10.257233

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

895.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

15577.36

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 70 OF 97

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1177.00

Transaction ID : SD10.257234

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1177.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1320.00

Transaction ID : SD10.257235

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1320.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising mailing -  
prospecting donors

Mailing Address 121 S Alfred St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

13416.56

Transaction ID : SD10.258333

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13416.56

1) **SUBTOTALS** This Period This Page (optional)..... ►

15913.56

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising telemarketing  
prospecting donors

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1755.00

Transaction ID : SD10.258334

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1755.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

Fundraising expenses not candidate specific  
paid from ORP Restricted account

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

-10000.00

Transaction ID : SD10.259100

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

Fundraising expenses not candidate specific  
paid from ORP Restricted account

Mailing Address 121 S Alfred St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

-10000.00

Transaction ID : SD10.259101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-10000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

-18245.00

2) **TOTALS** This Period (last page this line number only)..... ►

90637.17

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

90637.17

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 72 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	1	4

## TOTAL AMOUNT TRANSFERRED

35000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

35000.00

Transaction ID : H3.266459

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....



**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 73 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	1	4

TOTAL AMOUNT TRANSFERRED

20000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

20000.00

Transaction ID : H3.266460

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 74 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	6		2	0	1	4

## TOTAL AMOUNT TRANSFERRED

16497.20

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

16497.20

Transaction ID : H3.266461

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

 M M / D D / Y Y Y Y Y Y  
 05 / 19 / 2014

## TOTAL AMOUNT TRANSFERRED

170000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

170000.00

Transaction ID : H3.266462

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	1	4

TOTAL AMOUNT TRANSFERRED

36460.46

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

36460.46

Transaction ID : H3.266463

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 77 OF 97

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE	DATE OF RECEIPT MM / DD / YYYY 05 / 29 / 2014	TOTAL AMOUNT TRANSFERRED 8651.07
--	---	-------------------------------------

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....	8651.07
Transaction ID : H3.266464	
ii) Generic Voter Drive .....	
iii) Exempt Activities.....	
iv) Direct Fundraising (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	
v) Direct Candidate Support (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support.....	
vi) Public Communications Referring Only to Party (Made by PAC) .....	

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....	286608.73
TOTAL This Period (Generic Voter Drive) .....	0.00
TOTAL This Period (Exempt Activities) .....	0.00
TOTAL This Period (Direct Fundraising) .....	0.00
TOTAL This Period (Direct Candidate Support) .....	0.00
TOTAL This Period (Public Communications Referring Only to Party) .....	0.00
TOTAL This Period (Total Amount Transferred).....	286608.73

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 78 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>FactGem</b>		<b>Transaction ID : H4.266327</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2000 Auburn Dr., Suite 330					
City Beachwood	State OH	Zip Code 44122			
Purpose of Disbursement: Software purchase/license - not candidate specific		001		Allocated Activity or Event Year-To-Date 552030.43	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 01 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7500.00			42500.00		50000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Strategy Group for Phones</b>		<b>Transaction ID : H4.266328</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7669 Stagers Loop					
City Delaware	State OH	Zip Code 43015			
Purpose of Disbursement: Phones - not candidate specific		001		Allocated Activity or Event Year-To-Date 552425.50	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
59.26			335.81		395.07

<b>C. Full Name (Last, First, Middle Initial)</b> <b>West Broad Cellular</b>		<b>Transaction ID : H4.266339</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1477 W. Broad St.					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Cell phones - not candidate specific - MM 5/14		001		Allocated Activity or Event Year-To-Date 552425.50	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
34.83			197.34		232.17

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
7559.26		42835.81		50395.07

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 79 OF 97

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. Samuel Bain</b>		<b>Transaction ID : H4.266404</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address % OH GOP, 211 S 5th St				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43215	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific			<div style="border: 1px solid black; padding: 2px;">001</div>	Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">553567.09</div>	
Activity or Event Identifier: <b>Administrative</b>				Date <div style="border: 1px solid black; padding: 2px;">05</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2014</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">171.24</div>			<div style="border: 1px solid black; padding: 2px;">970.35</div>		<div style="border: 1px solid black; padding: 2px;">1141.59</div>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mr Robert T. Bennett</b>		<b>Transaction ID : H4.266405</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 636 S Grant Ave				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43206-1219	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific			<div style="border: 1px solid black; padding: 2px;">001</div>	Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">558244.69</div>	
Activity or Event Identifier: Administrative				Date <div style="border: 1px solid black; padding: 2px;">05</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2014</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">701.64</div>			<div style="border: 1px solid black; padding: 2px;">3975.96</div>		<div style="border: 1px solid black; padding: 2px;">4677.60</div>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr. Kevin P. Bingle</b>		<b>Transaction ID : H4.266406</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 408 E Schreyer Pl				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43214-2214	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific			<div style="border: 1px solid black; padding: 2px;">001</div>	Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">559932.38</div>	
Activity or Event Identifier: Administrative				Date <div style="border: 1px solid black; padding: 2px;">05</div> / <div style="border: 1px solid black; padding: 2px;">09</div> / <div style="border: 1px solid black; padding: 2px;">2014</div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">253.15</div>			<div style="border: 1px solid black; padding: 2px;">1434.54</div>		<div style="border: 1px solid black; padding: 2px;">1687.69</div>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">1126.03</div>		<div style="border: 1px solid black; padding: 2px;">6380.85</div>		<div style="border: 1px solid black; padding: 2px;">7506.88</div>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. Matthew J. Borges</b>		<b>Transaction ID : H4.266407</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 566291.51	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
953.87			5405.26		6359.13

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Thomas Dains Jr</b>		<b>Transaction ID : H4.266408</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 567234.83	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
141.50			801.82		943.32

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Ms. Katie Eagan</b>		<b>Transaction ID : H4.266409</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 570235.92	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
450.16			2550.93		3001.09

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1545.53		8758.01		10303.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Ms. Rita Graham</b>		<b>Transaction ID : H4.266410</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
<b>Mailing Address</b> % Ohio Republican Party 211 S. Fifth Street					
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43215			
<b>Purpose of Disbursement:</b> ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		<b>Category/Type</b> 001		<b>Allocated Activity or Event Year-To-Date</b> 572260.42	
<b>Activity or Event Identifier:</b> Administrative				<b>Date</b> MM / DD / YYYY 05 / 09 / 2014	
<b>FEDERAL SHARE</b>		<b>+</b>	<b>NONFEDERAL SHARE</b>		<b>= TOTAL AMOUNT</b>
303.68			1720.82		2024.50

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Lauren Harding</b>		<b>Transaction ID : H4.266411</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
<b>Mailing Address</b> % OH Rep Party 211 S 5th St					
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43215			
<b>Purpose of Disbursement:</b> ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		<b>Category/Type</b> 001		<b>Allocated Activity or Event Year-To-Date</b> 573026.67	
<b>Activity or Event Identifier:</b> Administrative				<b>Date</b> MM / DD / YYYY 05 / 09 / 2014	
<b>FEDERAL SHARE</b>		<b>+</b>	<b>NONFEDERAL SHARE</b>		<b>= TOTAL AMOUNT</b>
114.94			651.31		766.25

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Jacquelyn Reineke</b>		<b>Transaction ID : H4.266412</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
<b>Mailing Address</b> 211 S. 5th St.					
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code</b> 43215			
<b>Purpose of Disbursement:</b> ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		<b>Category/Type</b> 001		<b>Allocated Activity or Event Year-To-Date</b> 574158.72	
<b>Activity or Event Identifier:</b> Administrative				<b>Date</b> MM / DD / YYYY 05 / 09 / 2014	
<b>FEDERAL SHARE</b>		<b>+</b>	<b>NONFEDERAL SHARE</b>		<b>= TOTAL AMOUNT</b>
169.81			962.24		1132.05

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

<b>FEDERAL SHARE</b>	<b>+</b>	<b>NONFEDERAL SHARE</b>	<b>=</b>	<b>TOTAL AMOUNT</b>
588.43		3334.37		3922.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

<b>FEDERAL SHARE</b>	<b>NONFEDERAL SHARE</b>	<b>TOTAL AMOUNT</b>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Chris Schimpf</b>		<b>Transaction ID : H4.266413</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 578673.74	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
677.25			3837.77		4515.02

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Julia Smythe</b>		<b>Transaction ID : H4.266414</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party, 211 S 5th S					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 580073.10	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
209.90			1189.46		1399.36

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Ms. Jennifer Thrasher</b>		<b>Transaction ID : H4.266415</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % Ohio Republican Party 211 S. Fifth Street					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 582339.68	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
339.99			1926.59		2266.58

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1227.14		6953.82		8180.96

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Susan Waidner</b>		<b>Transaction ID : H4.266416</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address %OH Republican Party, 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 585162.11	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
423.36			2399.07		2822.43

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Sheryl Warner</b>		<b>Transaction ID : H4.266417</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 S. Fifth St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 589278.30	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
617.43			3498.76		4116.19

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr. William Wyrick</b>		<b>Transaction ID : H4.266418</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % Ohio Republican Party 211 S Fifth St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 590493.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
182.21			1032.51		1214.72

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1223.00		6930.34		8153.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CMDI</b>		<b>Transaction ID : H4.266332</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7704 Leesburg Pike, Ste 1					
City Falls Church	State VA	Zip Code 22043-2625			
Purpose of Disbursement: Computer software/license - not candidate specific		001		Allocated Activity or Event Year-To-Date 591443.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
142.50			807.50		950.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>New River Research Institute</b>		<b>Transaction ID : H4.266335</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2150 Country Club Rd., Suite 221					
City Winston-Salem	State NC	Zip Code 27104			
Purpose of Disbursement: app purchase/license - not candidate specific		001		Allocated Activity or Event Year-To-Date 594443.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
450.00			2550.00		3000.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Arena Communications</b>		<b>Transaction ID : H4.266336</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1780 Sequoia Vista Circle					
City Salt Lake City	State UT	Zip Code 84104			
Purpose of Disbursement: Online access/support - not candidate specific		001		Allocated Activity or Event Year-To-Date 595943.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
225.00			1275.00		1500.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
817.50		4632.50		5450.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. Matthew C. McAuliffe</b>		<b>Transaction ID : H4.266337</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Reimbursement - not candidate specific - see MM 5/14		001		Allocated Activity or Event Year-To-Date 595943.02	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 05 / 14 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
55.71			315.66		371.37

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mr. Matthew C. McAuliffe</b>		<b>Transaction ID : H4.266338</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: mileage reimbursement - not candidate specific - MM 5/14		001		Allocated Activity or Event Year-To-Date 595943.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
[MEMO ITEM]					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.88			118.32		139.20

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Ohio Expositions Commission</b>		<b>Transaction ID : H4.266341</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 717 E 17th Ave					
City Columbus	State OH	Zip Code 43211			
Purpose of Disbursement: Booth rental - not candidate specific		001		Allocated Activity or Event Year-To-Date 597523.02	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.00			1343.00		1580.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.00		1343.00		1580.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CMDI</b>		<b>Transaction ID : H4.266342</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 7704 Leesburg Pike, Ste 1				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Falls Church	State VA	Zip Code 22043-2625	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: Software - not candidate specific		001		Allocated Activity or Event Year-To-Date 598260.31	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
110.59			626.70		737.29

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Neopost Inc.</b>		<b>Transaction ID : H4.266348</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 45840				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City San Francisco	State CA	Zip Code 94145-0840	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: Postage - not candidate specific		001		Allocated Activity or Event Year-To-Date 599235.51	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
146.28			828.92		975.20

<b>C. Full Name (Last, First, Middle Initial)</b> <b>US Postmaster</b>		<b>Transaction ID : H4.266349</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2323 Citygate Drive				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43218	<input type="checkbox"/> Public Comm (ref to party only) by PAC		
Purpose of Disbursement: Postage - not candidate specific		001		Allocated Activity or Event Year-To-Date 599435.51	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
30.00			170.00		200.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
286.87		1625.62		1912.49

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>PLIC - SBD Grand Island</b>		<b>Transaction ID : H4.266350</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 10372					
City Des Moines	State IA	Zip Code 50306			
Purpose of Disbursement: Insurance premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 599827.95	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.87			333.57		392.44

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Superior Dental Care</b>		<b>Transaction ID : H4.266351</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6683 Centerville Business Pkwy					
City Centerville	State OH	Zip Code 45459			
Purpose of Disbursement: Insurance premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 600500.70	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
100.91			571.84		672.75

<b>C. Full Name (Last, First, Middle Initial)</b> <b>United Health Care</b>		<b>Transaction ID : H4.266352</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9200 Worthington Rd					
City Westerville	State OH	Zip Code 43082			
Purpose of Disbursement: Insurance premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 605454.08	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
743.01			4210.37		4953.38

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
902.79		5115.78		6018.57

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>United Health Care</b>		<b>Transaction ID : H4.266381</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9200 Worthington Rd					
City Westerville	State OH	Zip Code 43082			
Purpose of Disbursement: Staff Insurance Premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 609577.89	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
618.57			3505.24		4123.81

<b>B. Full Name (Last, First, Middle Initial)</b> <b>PLIC - SBD Grand Island</b>		<b>Transaction ID : H4.266382</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 10372					
City Des Moines	State IA	Zip Code 50306			
Purpose of Disbursement: Staff Insurance premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 609970.33	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
58.87			333.57		392.44

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Superior Dental Care</b>		<b>Transaction ID : H4.266388</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6683 Centerville Business Pkwy					
City Centerville	State OH	Zip Code 45459			
Purpose of Disbursement: Staff insurance premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 610531.21	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 14 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
84.13			476.75		560.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
761.57		4315.56		5077.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Capitol Contender</b>		<b>Transaction ID : H4.266356</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 274 S Third St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: IT services - not candidate specific		001		Allocated Activity or Event Year-To-Date 612531.21	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 16 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
300.00			1700.00		2000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>E-Roots Consulting</b>		<b>Transaction ID : H4.266357</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 274 S Third					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: IT services - not candidate specific		001		Allocated Activity or Event Year-To-Date 620495.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 16 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1194.70			6770.00		7964.70

<b>C. Full Name (Last, First, Middle Initial)</b> <b>FactGem</b>		<b>Transaction ID : H4.266358</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2000 Auburn Dr., Suite 330					
City Beachwood	State OH	Zip Code 44122			
Purpose of Disbursement: Software purchase/license - not candidate specific		001		Allocated Activity or Event Year-To-Date 820495.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 19 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
30000.00			170000.00		200000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31494.70		178470.00		209964.70

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>US Postmaster</b>		<b>Transaction ID : H4.266359</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2323 Citygate Drive					
City Columbus	State OH	Zip Code 43218			
Purpose of Disbursement: Postage - not candidate specific		001		Allocated Activity or Event Year-To-Date 820995.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
75.00			425.00		500.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>TVEyes</b>		<b>Transaction ID : H4.266360</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1150 Post Rd					
City Fairfield	State CT	Zip Code 06824			
Purpose of Disbursement: Media monitoring - not candidate specific		001		Allocated Activity or Event Year-To-Date 824595.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 20 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
540.00			3060.00		3600.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>US Postmaster</b>		<b>Transaction ID : H4.266367</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2323 Citygate Drive					
City Columbus	State OH	Zip Code 43218			
Purpose of Disbursement: Postage - not candidate specific		001		Allocated Activity or Event Year-To-Date 825085.91	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
73.50			416.50		490.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
688.50		3901.50		4590.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Greg Allison</b>		<b>Transaction ID : H4.266419</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 826460.28	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
206.16			1168.21		1374.37

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mr. Samuel Bain</b>		<b>Transaction ID : H4.266420</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH GOP, 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 827721.14	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
189.13			1071.73		1260.86

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr Robert T. Bennett</b>		<b>Transaction ID : H4.266421</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 636 S Grant Ave					
City Columbus	State OH	Zip Code 43206-1219			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 832917.58	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
779.47			4416.97		5196.44

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1174.76		6656.91		7831.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. Kevin P. Bingle</b>		<b>Transaction ID : H4.266422</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 408 E Schreyer Pl					
City Columbus	State OH	Zip Code 43214-2214			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 834791.67	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
281.11			1592.98		1874.09

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mr. Matthew J. Borges</b>		<b>Transaction ID : H4.266423</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 841856.47	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1059.72			6005.08		7064.80

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Thomas Dains Jr</b>		<b>Transaction ID : H4.266424</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 843306.23	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
217.46			1232.30		1449.76

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1558.29		8830.36		10388.65

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Ms. Katie Eagan</b>		<b>Transaction ID : H4.266425</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 846639.04	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
499.92			2832.89		3332.81

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Ms. Rita Graham</b>		<b>Transaction ID : H4.266426</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % Ohio Republican Party 211 S. Fifth Street					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 848663.54	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
303.68			1720.82		2024.50

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Lauren Harding</b>		<b>Transaction ID : H4.266427</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Rep Party 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 848861.76	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
29.73			168.49		198.22

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
833.33		4722.20		5555.53

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Jacquelyn Reineke</b>		<b>Transaction ID : H4.266428</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 S. 5th St.					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 850115.08	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
188.00			1065.32		1253.32

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Chris Schrimpf</b>		<b>Transaction ID : H4.266429</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 855115.28	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
750.03			4250.17		5000.20

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Julia Smythe</b>		<b>Transaction ID : H4.266430</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party, 211 S 5th S					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 856663.50	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
232.23			1315.99		1548.22

**SUBTOTAL of Allocated Federal and NonFederal Activity This Page**

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1170.26		6631.48		7801.74

**TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))**

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Ms. Jennifer Thrasher</b>		<b>Transaction ID : H4.266431</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % Ohio Republican Party 211 S. Fifth Street					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 858940.38	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
341.53			1935.35		2276.88

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Susan Waidner</b>		<b>Transaction ID : H4.266432</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address %OH Republican Party, 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 862069.60	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
469.38			2659.84		3129.22

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Sheryl Warner</b>		<b>Transaction ID : H4.266433</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 S. Fifth St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 866637.58	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
685.20			3882.78		4567.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1496.11		8477.97		9974.08

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. William Wyrick</b>		<b>Transaction ID : H4.266434</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % Ohio Republican Party 211 S Fifth St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 867980.56	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 23 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
201.45			1141.53		1342.98

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Superior Dental Care</b>		<b>Transaction ID : H4.266373</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6683 Centerville Business Pkwy					
City Centerville	State OH	Zip Code 45459			
Purpose of Disbursement: Staff Insurance premium - for staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 868476.04	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 27 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
74.32			421.16		495.48

<b>C. Full Name (Last, First, Middle Initial)</b> <b>United Health Care</b>		<b>Transaction ID : H4.266377</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9200 Worthington Rd					
City Westerville	State OH	Zip Code 43082			
Purpose of Disbursement: Staff Insurance Premium - staff not more than 25% - not candidate specific		001		Allocated Activity or Event Year-To-Date 871794.29	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 27 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
497.74			2820.51		3318.25

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
773.51		4383.20		5156.71

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Capitol Contender</b>		<b>Transaction ID : H4.266453</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 274 S Third St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: IT Consultants - not candidate specific		001		Allocated Activity or Event Year-To-Date 872794.29	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 29 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
150.00			850.00		1000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>E-Roots Consulting</b>		<b>Transaction ID : H4.266454</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 274 S Third					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: ORP Staff, payroll, taxes and fees - not candidate specific		001		Allocated Activity or Event Year-To-Date 878158.29	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 29 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
804.60			4559.40		5364.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>eOhio Solutions LLC</b>		<b>Transaction ID : H4.266455</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 900 S 3rd St, Apt B					
City Columbus	State OH	Zip Code 43206			
Purpose of Disbursement: Technology consultant - not candidate specific		001		Allocated Activity or Event Year-To-Date 888158.29	
Activity or Event Identifier: Administrative		Category/ Type		Date 05 / 29 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1500.00			8500.00		10000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2454.60		13909.40		16364.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
57919.18	328208.68	386127.86